



HealthCircle
Peak Nutrition Clinic

UNIVERSITY OF COLORADO
COLORADO SPRINGS

NAME

DAY/DATE

FOOD Day 1

| <u>MEAL</u> | <u>TIME</u> | <u>FOODS AND DRINK INTAKE</u> | <u>PORTIONS (Cup, Tablespoon, etc.)</u> |
|-------------|-------------|-------------------------------|---|
| Breakfast | | | |
| Snack | | | |
| Lunch | | | |
| Snack | | | |
| Dinner | | | |
| Snack | | | |

3 DAY FOOD LOG

FOOD Day 2

| <u>MEAL</u> | <u>TIME</u> | <u>FOODS AND DRINK INTAKE</u> | <u>PORTIONS (Cup, Tablespoon, etc.)</u> |
|-------------|-------------|-------------------------------|---|
| Breakfast | | | |
| Snack | | | |
| Lunch | | | |
| Snack | | | |
| Dinner | | | |
| Snack | | | |

Please be as accurate as possible. It is easier to record your intake at the end of the meal rather than the end of the day. Do not forget to record water, diet soda, gum, etc.

NAME _____

DAY/DATE _____

3 DAY FOOD LOG

FOOD Day 3

| <u>MEAL</u> | <u>TIME</u> | <u>FOODS AND DRINK INTAKE</u> | <u>PORTIONS (Cup, Tablespoon, etc.)</u> |
|-------------|-------------|-------------------------------|---|
| Breakfast | | | |
| Snack | | | |
| Lunch | | | |
| Snack | | | |
| Dinner | | | |
| Snack | | | |

Please be as accurate as possible. It is easier to record your intake at the end of the meal rather than the end of the day. Do not forget to record water, diet soda, gum, etc.

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3 DAY EXERCISE LOG

EXERCISE Days 1-3

| <u>Day</u> | <u>TIME</u> | <u>Type of Exercise</u> | <u>Duration</u> |
|------------|-------------|-------------------------|-----------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |

Please be as accurate as possible. It is easier to record your intake at the end of the meal rather than the end of the day. Do not forget to record water, diet soda, gum, etc.

NAME _____

DAY/DATE _____